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PTO/SB/21 (03-03)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/601,968	
	Filing Date	June 23, 2003	
	First Named Inventor	Fensome et al	
	Group Art Unit	1615	
	Examiner Name		
Total Number of Pages in this Submission	4	Attorney Docket Number	January 8, 2004

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1-Reference
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	HOWSON AND HOWSON Cathy A. Kodroff		
Signature			
Date	January 8, 2004		

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on this date:			
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AHPWA23AUSA

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of) Group Art Unit: 1615
Fensome et al) Examiner:
Appln. No. 10/601,968) Confirmation No. 8810
Filed: June 23, 2003)
For: CYCLOTHIOCARBAMATE)
DERIVATIVES AS PROGESTERONE)
RECEPTOR MODULATORS AND)
METHODS OF TREATING SKIN)
DISORDERS) January 8, 2004

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

Applicant submits to the Examiner the attached Form PTO/SB/08A document listing and this paper pursuant to 37 CFR § 1.56 and § 1.97-1.98. Form PTO/SB/08A is attached and a copy of the document is enclosed herewith.

This information is being supplied prior to issuance of a 1st Office Action in the merits. Therefore, no fees are believed due.


The Director is hereby authorized to charge any deficiency in any fees due with the filing of this paper or credit any overpayment in any fees to our Deposit Account Number 08-3040.

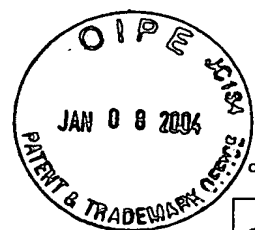
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The Examiner is respectfully requested to consider the enclosed document identified in this paper and in the attached Form PTO/SB/08A during the course of examination of this application.

Respectfully submitted,

HOWSON AND HOWSON
Attorneys for Applicant

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INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Complete if Known	
				Application Number	10/601,968
				Filing Date	June 23, 2003
				First Named Inventor	Fensome et al
				Group Art Unit	1615
				Examiner Name	
Sheet	1	of	1	Attorney Docket Number	AHPWA23AUSA

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code ² (if known)			
	I	US-2003/0083322 A1	05-01-2003	Kraemer et al	

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³ - Number ⁴ -Kind Code ⁵ (if known)				

Examiner Signature		Date Considered	
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* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

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